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## BIB DATA SHEET

CONFIRMATION NO. 3163

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/599,017		340	1611	8289.89222

**APPLICANTS**

Thorkild Andersen, Hadsten, DENMARK;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/DK05/00178 03/17/2005

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

DENMARK PA200400432 03/17/2004

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\***

08/29/2007

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		DENMARK	1	10	5
Verified and Acknowledged	// Examiner's Signature	Initials				

**ADDRESS**

FITCH EVEN TABIN & FLANNERY  
 120 SOUTH LASALLE STREET  
 SUITE 1600  
 CHICAGO, IL 60603-3406  
 UNITED STATES

**TITLE**

Contact Lens, Container And Insert For Avoiding Infection Of The Eye

<b>FILING FEE RECEIVED</b> 780	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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